

Meeting of the Cabinet - 11th February, 2009

Report of the Director of Adult, Community and Housing Services

<u>Joint Review – Commissioning Services for People with Learning</u> Disabilities and Complex Needs

Purpose of Report

- 1. To report to Cabinet the findings and recommendations of the Joint Review on commissioning services for people with learning disabilities and complex needs.
- 2. To seek Cabinet approval for the Action Plan following from the Joint Review.

Background

- 3. During autumn 2008, the Commission for Social Care Inspection, the Health Care Commission and the Mental Health Act Commission jointly carried out a series of reviews in nine Councils, to assess how the Councils with their local Primary Care Trusts commission services for people with learning disabilities and complex needs. Dudley was one of the Councils selected to take part in a Review
- 4. The Reviews were prompted by concerns about the health care of people with a learning disability which have emerged in several recent national reports the Joint Health Care Commission/CSCI investigation into allegations of abuse in Cornwall (2005); the Mencap report 'Death by Indifference (2007); and Sir Jonathan Michael's report 'Health care for all' published in July 2008.
- 5. The Review focused on people with complex needs rather than the whole population of people with a learning disability. There was a particular emphasis on whether Council and PCT commissioning practice was delivering good outcomes for this group
- 6. The Review team was made up of representatives of the three Commissions; a commissioner from another PCT; a family carer and an 'expert by experience' i.e. a person with a learning disability who is a user of services in another area, with his supporter.
- 7. The Joint Review's assessment framework was developed by a national expert reference group including people with a learning disability and

- family carers. The framework comprises eight standards based on the Department of Health Guidance 'Commissioning for Health and Wellbeing'
- 8. The Council was required to submit a self-assessment based on these eight standards in September 2008, including examples of good practice, and the inspection fieldwork was carried out in Dudley between 15th and 23rd October.

The inspection programme included:

- An in-depth examination of five cases
- A public meeting
- Focus groups with carers, providers, advocacy groups and Council and PCT staff.
- Interviews with managers from the Council and PCT
- 9. The expert by experience carried out mystery shopping of local services to find out whether these services were accessible to people with complex needs. A copy of his report can be found in the members room and on the Committee Management Information System (CMIS)
- 10. The headline feedback was received on 31st October and the final report in January 2009. A copy of the final report can be found in the members room and on the Committee Management Information System (CMIS) -
- 11. The Review is not scored but will be used by CSCI as a source of admissible evidence for the Social Care performance review of the Council for 2008-2009.

Findings

- 12. The Joint Review identified many strengths with Dudley services for people with a learning disability and complex needs:
- 13. The Council and the PCT were working well together both strategically and operationally.
- 14. The Council were reviewing the Learning Disability Strategy and developing a commissioning strategy to improve services for people with complex needs.
- 15. The Council and PCT had sound financial systems in place, including a joint resource allocation panel.
- 16. The Council and PCT had developed a strategy and formed a new team to support people who have autism.

- 17. There were effective links between Learning Disability Services and Housing and the Council had successfully supported people to move into supported living schemes.
- 18. The Council and PCT are developing self-directed support and ten people with a learning disability, including two with complex needs, are involved in a personal budget pilot.
- 19. Advocacy services are good. People from the black and minority ethnic community were appropriately supported.
- 20. The Learning Disability Partnership Board was well-managed and produced good quality work; it had clear plans and targets for the future.
- 21. Staff from both organisations were committed and dedicated to making improvements for people with complex needs.

22. The Joint Review identified the following principal areas for development:

- 23. Day Services require further modernisation and more people with complex needs should be able to access opportunities in the community.
- 24. The Council should continue to promote the use of direct payments with people with complex needs and their carers.
- 25. More people with learning disability should have a person-centred plan; further work is needed to ensure that both person-centred plans and communication passports are used to their full potential. More carers should have a carers' assessment.
- 26. The Special Needs Register should be used more systematically to identify key trends and gaps in services for people with a learning disability.
- 27. The Council and PCT should improve communication with the Specialised Commissioning Team (West Midlands) which is responsible for placing people with a learning disability who require secure accommodation.
- 28. Health Action Plans for people with a learning disability should be reviewed regularly and kept up-to-date. The PCT should enhance the capacity of the Health Facilitation Team
- 29. Public information on services for people with complex needs and safeguarding should be made more accessible, to fully explain what services are available.
- 30. The Council and the PCT could make better use of information from individual reviews to inform the commissioning of services.

- 31. The Council and PCT should improve the analysis of information from safeguarding referrals and investigations.
- 32. The recommendations of the Joint Review are being addressed through a comprehensive Action Plan, much of which will have been implemented by the end of March. A copy of the Action Plan is attached
- 33. The major area for improvement relates to Day Services; a further report on the modernisation of Day Services will be brought to Cabinet in June 2009.
- 34. New Government guidance on services for people with a learning disability Valuing People Now –was published in January 2009. Valuing People Now will inform a new Learning Disability Strategy for the Borough which will be reported to Cabinet in March 2009.
- 35.CSCI is making a DVD about the programme of reviews in the nine Councils; Dudley has been asked to take part as an example of good practice.

Finance

36. Most of the improvements required as a result of the Joint Review are relatively modest in scope and no additional investment is required.

Law

37. The Council has powers and duties to support persons with a learning disability under its welfare function contained in a number of statutes including the National Assistance Act 1948, the Chronically Sick and Disabled Persons Act 1970, the Community Care Act 1990 and the Mental Health Acts and may do anything incidental to conducive to or which facilitates the discharge of its functions under section 111 of the Local Government Act 1972.

Equality Impact

38. The Council's Policy on Equality and Diversity addresses our commitment to ensuring that all Dudley citizens have access to services and opportunities that allow them to play as full a role as possible in our local community. The improvements in services for people with learning disabilities and complex needs will enable them to experience the same ordinary life opportunities that many of us take for granted

Recommendations

It is recommended that Cabinet

- 39. Note the findings and recommendations in the final report of the Learning Disability Joint Review.
- 40. Approve the Action Plan.

Linda Sanders
Director of Adult, Community and Housing Services

Xinds Sondas.

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DUDLEY MBC & DUDLEY PCT LEARNING DISABILITY JOINT REVIEW ACTION PLAN

SUB – GROUPS OF THE LEARNING DISABILITY PARTNERSHIP BOARD

- 1. Involving People (Advocacy; communication; PCP; public information; website; complex needs)
- 2. Carers
- 3. Housing
- 4. Health
- 5. Opportunities, Jobs and Learning (to include Day Services)
- 6. Diversity and Relationships
- 7. Keeping Safe
- 8. Joint Commissioning Group

MANAGERS - DMBC

RC RICHARD CARTER
AP ANN PARKES
JP JOHN POVEY
TI TONY IVKO
DG DONNA GREENLAND
SR SARAH RANDLE
CE CHRIS ETHERINGTON
AI AMANDA IRWIN
SB SUE BEASLEY
PW PAUL WHITE
CR CHRISTINE ROWLEY

PCT MANAGERS WHO CONTRIBUTED TO THE ACTION PLAN ARE IDENTIFIED IN SECTION 4.

SECTION 1: PUTTING PEOPLE AT THE CENTRE OF COMMISSIONING

<u>Lead manager : Ann Parkes</u>

LDPB Sub Groups – Involving People; Carers; Opportunities

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
More people have person centred plans	1.1	New targets to be set for reviewing officers Modified version of PCP to be adopted for clients not facing major life decisions/changes Negotiate assistance from other agencies e.g. Dudley Advocacy Produce a definition of all plans Produce a PCP pathway Develop a Person Centred ICI Amend Review forms to ensure record of PCP/CP kept on SNR	AP MS MS	June 2009 April 09 Feb 09 Feb 09 March 09 March 09	Target set for PCPs for 2009-2010 (75) to include: Young people in day centres (25) External placements. (16) Communication Strategy group have started this work

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
PCPS focus on meeting people's aspirations	1.2	Refresh training for Social Workers/Nurses on PCPs Quality audit of PCPs	АР	June 2009	Audit of staff already trained instigated
People with complex needs are fully involved in service development	1.3	Complex needs champion appointed to LDPB	RC	March 2009	Champion appointed Nov 2008.
		Day centres to review how people with complex needs are engaged	SC	March 2009	
More people with complex needs have a communication passport. The standard of information contained in communication	1.4	Audit use of Communication Passports by means of questionnaire to all organisations who have had staff trained	AI/SB	March 2009	Questionnaire being sent to all organisations who have had staff trained Will be part of PCP benchmarking activity
passports is acceptable. Communication passports are used effectively.		Review purpose and design of CPs	АР	March 2009.	Target agreed for number of 100 new communication passports with priority groups.
People who use a communication book are appropriately supported		Staff/carers briefings on use of communication passports/communication books to be arranged	PW	February 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
More carers have a carers assessment Carers assessments are reviewed	1.5	Target agreed for carers' assessments/ and 2009-2010 (120).	АР	Immediate	Carers' assessment target for 2008-09 will be achieved. Carers assessment review process used in OPPD Division to be adopted.
		Audit training of LD staff		June 2009	
Carers are fully involved in service development	1.6	Partners in Care group to be established.	AP/CR		Meeting held to re-form carers' group on 21 st Nov.
		Consultation workshops with carers to be arranged on day services and housing		March 2009	
		Review Carer representation on sub groups of LDPB		January 2009	LDPB agreed new configuration and member ship of subgroups on 5 th Jan.
There is a full range of public information leaflets in accessible format in hard copy and on the website to explain what services are available	1.7	Audit what is currently available – locally & nationally Agree 'topics' for leaflets; write leaflets and consult.	АР	June 2009.	All managers submitting proposals to SR
		Publish final versions			
		Amend existing social care leaflets in accessible format			Meeting 12/1/09 to finalise
		Launch LDPB website		February 2009	website content.

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
All staff are familiar with the complaints procedure	1.8	Guidance on complaints and easy- read leaflet to be briefed out to teams	TMs/Unit managers	January 2009	All staff have been re-issued with a copy of complaints leaflet, which will be placed on agenda of all team meetings & minuted
Everyone with learning disability and complex needs has been offered a direct payment or personal budget	1.9	Identify which clients already have DP Write to those who do not have a DP with information	CE/SR/DG TMs	January 2009 January 2009	
		Programme in meetings/reviews with clients and carers	TMs	February 2009	
The experiences of people who use direct payments influence future commissioning practice	.10	Analysis of how DPs are spent to be undertaken	DP Team	March 2009	

SECTION 2: UNDERSTANDING THE NEEDS/SHARING AND USING INFORMATION MORE EFFECTIVELY

<u>Lead manager : Richard Carter</u> <u>LDPB Sub-Group ; Joint Commissioning Group</u>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
SNR is used to its full potential to inform commissioning	2.1	Agree content and format of management reports from SNR.	RC		Content agreed and first quarterly report to be produced for January 2009.
Data quality on SNR is improved; the system is safe and robust	2.2	Mechanisms to be put in place to prompt staff to update SNR. Update log to be included in the system.	CE/AP	March 2009	Second post now filled – so cover should be available once new staff member fully trained.
		Cover to be built in for SNR co- ordinator when sick/on leave			Revised instruction issued to staff re updating SNR

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Learning Disability Strategy and Commissioning Strategy clearly identify gaps in services. The strategy includes a section dedicated to people with learning disability and complex needs	2.3	Conclude consultation on commissioning strategy and publish final version. Draft revised Learning Disability Strategy in line with Valuing People Now.	JP RC	January 2009 Feb 2009	Feedback on Commissioning Strategy collated at end November ready for presentation to LDPB in January.
		Consult on revised Strategy Publish a combined Learning Disability Strategy /Commissioning Strategy. Accessible version to be produced.	RC RC RC	Feb 2009 March 2009 (Cabinet) April 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
The needs of lesbian, gay, bisexual and transgender people are recognised in commissioning	2.4	To be included in revised Learning Disability Strategy	RC	March 2009	
strategies.		Remit of Ethnicity sub-group of LDPB to be widened to include Diversity	RC	January 2009	Agreed by LDPB in January 2009.
		Sexuality to be logged on the SNR	CE	January 2009	Actioned
Providers including smaller providers are involved in shaping future services	2.5	Communication/consultation meetings with providers to be organised on a more regular basis, via Provider Forum and WMCA. Head of Commissioning to attend Provider Forum	АР	January 2009	Communication 'calendar' agreed for meetings with providers.
		Review involvement of providers in LDPB subgroups			Agreed by LDPB January 2009.

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Information from reviews is used systematically to inform commissioning.	2.6	Audit current usage of review feedback form; check information is being recorded Copies of back page to be sent to Julie Cox Work with MIT to ensure SWIFT /AIS will record unmet need	JP	February 2009	Julie Cox has done this and findings will inform work led by Mandy Sharman on updating review form/ICI etc
		Commissioning team to produce quarterly analysis of information extracted from reviews, to coincide with quarterly reports from SNR.			First analysis will be produced in March 2009.
Establish links with SSA to ensure improved planning for people with complex needs in SSA commissioned placements	2.7	Audit number of cases in which SSA involved	DG/SR	January 2009	Completed.
, , , , , , , , , , , , , , , , , , ,		Develop a clear case management protocol with PCT/SSA/CTLD for people using SSA commissioned services	AP/JP	March 2009	

SECTION 3: ASSURING HIGH QUALITY PROVIDERS; DEVELOPING INCENTIVES

<u>Lead manager</u>: John Povey <u>LDPB Sub-group</u>: Involving People; Complex Needs

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Service users and carers are involved in the monitoring of	3.1	Cost work & commission from VfC	JP	March 2009	
internal and external social care services		Work with VfC to develop model based on Quality Network		March 2009	
		Advertise for and appoint service users and carers to take part in contract monitoring visits for a fixed fee.	JP	March 2009	
		Consideration should be given to whether we should have a reciprocal arrangement with another self advocacy group eg Sandwell			
		3 inspections to be carried out with expert by experience in 2009.	JP	September 2009	
		Audit the outcomes of experts by experience & report to LDPB.	JP	December 2009	
Financial incentives are in place for providers in recognition of high quality or innovative services	3.2	Assess cost impact of replicating OPPD model which links to star rating	JP	January 2009	Assessment completed.
quanty of finitevative services		Assess cost implications of applying care cost calculator to all existing providers	JP	January 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Providers' performance improves; there are no 'no star' services in Dudley.	3.3	Analyse LAMA data to identify poor performers	JP	January 2009	Initial analysis completed.
Services for people with complex needs and challenging behaviour have been reviewed	3.4	Review to be included in the review of the Learning Disability Strategy	АР	March 2009.	

SECTION 4 : HEALTH CARE

<u>Lead manager : Carol Richardson</u> <u>LDPB Sub-group : Health</u>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
The health and care needs of people with a learning disability are met when they go into hospital	4.1	Dudley Group of Hospitals to be requested to produce an action plan from their review of practices in the light of Death By Indifference & Health Care for All Reports	Sue Roberts	Nov 2008	Action plan requested
		Commissioners to discuss via Quality Review meetings Individual patient experiences as a regular item on the agenda.	Sue Roberts/Neill Bucktin	Jan 2009	Specific case examples requested from the LDSHS team for discussion
		Review of the development of joint funded post for a Hospital Liaison Nurse for patients with LD in line with Good Practice in learning disability nursing. A post of a liaison nurse be established within the hospital to work with the patients and staff to ensure the needs of patients with learning disabilities are being addressed	Sue Roberts/Neill Bucktin	Jan/Feb 2009	Evidence/validation of improvements to be obtained from other Trusts who have established these posts

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
The health and care needs of people with a learning disability are met when they go into hospital	4.1 (cont'd)	Joint working with DGH and Learning Disability Specialist Health Team at Acute Liaison Group meeting	PALS Officer DGH + Jacqui Howells, Health Facilitation coordinator + GM for LDSHS	March 2009	To be developed to ensure the reporting arrangements are via the Health Sub Group of the PCT
		Improve the Care Pathway for patents from Primary to Secondary care and back to Primary care. With proactive liaison with GP surgeries by CTLD nurses (in line with Good Practice in learning disability nursing providing appropriate clinical intervention and support of the DES) to obtain information re clients being referred to DGH, then to provide support Other actions: Policies, procedures and training to be reviewed and an action plan to be developed to address the support needs of patients with special needs (i.e learning disabilities). Within the patient data recording, a system must be developed to identify patients who have a learning disability and may need additional support whilst accessing care.	Commissioning + Snr Nurse from PCT and LDSHS	Jan – March 2009	Review of Bench marking against Good Practice in learning disability nursing.

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
The health and care needs of people with a learning disability are met when they go into hospital	4.1 (cont'd)	 On admission of a patient with special needs (learning disabilities) information to be obtained from the patients family, carers, Health Action Plans or their communication passport relating to the patients communication, feeding and mobility support needs and kept on the ward to support their care plans. (see draft of LD ward care plan supported for introduction at Acute Liaison group) On admission the patient with special needs (i.e learning disabilities) be allocated a key worker on the ward/admission area to support the patient and ensure their needs are met Two days post admission the service PALS Co-ordinator to visit the patient to establish if their needs are being met and to facilitate any outstanding issues 			

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESPONSIBLE MANAGER	TIMESCALE	PROGRESS REPORT
The exact number of active health action plans is known.	4.2	Primary Care working Group to develop and manage the review of the SNR + Read Code cross match information to establish information of health action plans	Carol Richardson/Ann Parkes	Dec 08 – Feb 2009	Process of accessing information on health action plans being reviewed via the LD Primary Care Sub
Health Action Plans are regularly reviewed and are up-to-date.		Directed Enhanced Services will facilitate Health Screening which highlights risks to health, these are then developed by the clients carer/support staff into an Action Plans + recording on SNR	Commissioners/Sue Cooper		
Health/social care professionals are aware how these plans are to be used.		Health Action plans will be discussed at client reviews with CTLD worker Information from reviews fed to SNR			
Annual health screening is being achieved The PCT has accurate data	4.3	Directed Enhanced Services are being commissioned by PCT with Multi-Professional Training for primary care delivered by the LDSHS team	Commissioners	January – Feb 2009	All GP practices signed up to the DES will receive Multidisciplinary training
on how many people have been screened		Commissioners will receive information via DES and SNR will be used to cross reference data	Commissioners/SNR	Feb 2009	

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
The capacity of the of the Health facilitation team has been reviewed and its work has been prioritised	4.4	Options review being undertaken by HF team for service redesign	GM/Snr Nurse for LDSHS + HF team	Jan – March 2009	
		Commissioners to review options.	Commissioners		
The clinical skills of community nurses in the Nurses in the CTLD team are being used effectively.	4.5	Review of CTLD Nursing to develop the service in line with Good Practice in learning disability nursing	Commissioning + Snr Nurses from PCT and LDSHS	Jan – March 2009	Review of Bench marking against Good Practice in learning disability nursing. With proposal for development report
The mental health needs of people with learning disability are being met. Council and PCT staff receive appropriate training.	4.6	Ongoing training being developed to address identified training needs	GM from LDSHS (Carol Richardson) + Lead officer for LD Social Care (Ann Parkes)		Training programme has been arranged.

SECTION 5 : DAY SERVICES

<u>Lead manager</u>: Ann Parkes <u>LDPB Sub Group</u>: Learning, Jobs and Opportunities

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Day Service Strategy agreed by Cabinet in 2007 is reviewed in the light of (a) Joint Review findings and (b) difficulty in selling Audnam/Grange House	5.1	Agree way forward with Director and Cabinet member Report to Cabinet	RC RC	January 2009 March 2009	Outline report to Cabinet agreed with Director and Cabinet Member.
The management team in Day Services is restructured to deliver the change programme	5.2	Restructuring proposals to be agreed. HR process to be determined New appointments to be made	RC/ AP	January 2009	
Staffing establishment in Day Services is restructured to deliver the change programme	5.3	HR process to be determined Introduce progression for support workers Review all DCO posts	RC/ AP	From March 2009	
Consistent good quality electronic recording is in place.	5.8	Audit records Audit staff training achieved Reconsider allocation of staff across existing services	DG/ SR	January 2009 January 2009 March 2009	Audit completed.

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
The range of community based services/satellites is increased.	5.4	DACHS Community Centres manager to be co-opted on to Day Service project team	AP	January 2009	Manager agreed.
More people with complex needs have access to these activities.		Identify dedicated staff to focus on community capacity building.	АР		
		Identify numbers of people with complex needs currently accessing community activities	RC	January 2009	Completed
More of the service is delivered by external providers	5.5	Encourage increased take-up of innovation grant	JP	June 2009	
Take up of Personal Budgets increases as an alternative to day centre attendance	5.6	Awareness raising events for stakeholders	ТІ	March 2009	
centre attendance		Audit records to ensure DP are offered Liaise with MIT to ensure SWIFT/AIS will capture data	LD manag ers	March 2009	
		Analysis of how DPs are spent to be undertaken	DP team	March 2009	
People with learning disability and complex needs are involved in decisions re their care plans.	5.7	Audit of care plans to be undertaken	DS Manag ers	June 2009	
Care Plans reflect people's aspirations and preferences					

SECTION 6: MAKING IT HAPPEN - LOCAL ACCOUNTABILITY, CAPABILITY AND LEADERSHIP

<u>Lead manager : Richard Carter</u> <u>LDPB Sub Groups : Keeping Safe; Joint Commissioning Group</u>

OUTCOME	NO.	KEY ACTIONS/NEXT STEPS	RESP MGR	TIMESCALE	PROGRESS REPORT
Interests of people with LD to be fully represented at Safeguarding Board	6.1	Establish a 'Keeping Safe' sub group of the LDPB which will have dual reporting responsibility	RC	January 2009	Group established.
Implement Transfer of Funding	6.2	Identify and agree sum to be transferred; report to Cabinet.	RC/AP/SR	March 2009	Progress report sent to DH in December 2008.
		Update and revise S75 agreements	RC/NB		